(d) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) Due to resource crunch at present, new dispensary couldnot be opened at Vasant Vihar. However, due to distance from the nearest dispensary No. 52, which is at Sector 6, R.K. Puram, an extension counter has been opened within the compound of CBI Colony, Vasant Vihar.

**Grievance Redressal Committee in hospitals**

3466. SHRIMATI JAYA BACHCHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the High Court of Delhi has directed the Central Government as well as Government of Delhi to set up the Grievance Redressal Committee in each of their hospitals to help improve facilities for patients within a given time-frame;

(b) if so, what are the details in this regard;

(c) whether these Committees will also take up complaints from patients and visitors or merely attend to staff related problems; and

(d) the action Government has taken so far for setting up these Committees?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) Grievance Redressal Committee/Cells do already exist in Central Government Hospitals under the Chairmanship of Addl. Medical Superintendents. To enable the public to lodge written complaints/ suggestions/grievances, various complaint boxes have been installed at different locations in the hospital premises. These boxes are opened periodically and then all complaints/ suggestions/grievances, received from patients/visitors are put up before the grievance committee. The Grievance Committee meets every week/month to examine the same on the basis of action taken note received from concerned departments/sections on the complaints/ suggestions/grievances and accordingly decision/recommendation of the Grievance Committee is communicated to the administration for their redressal.

**Huge pendency and dels.y in licensing of diagnostic products by DCGI**

3467. DR. V. MAITREYAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state;

(a) whether it is a fact that there is a undue delay in issuing import licenses for Invitro Diagnostic Kits by the Drug Controller General office;

(b) if not, the number of applications for import of Invitro Diagnostic Kits received with date and month-wise during the year 2006-07 and 2007-08 and the disposal of the same date the month-wise;

(c) whether there is any official web site for DCGI office;

(d) if so, the reasons for not publishing the details of the import applications of Invitro Diagnostic Kits in the web site; and

(e) what steps are being taken to computerize the system for easy tracking of pending applications in the DCGI?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKALAKSHMI): (a) and (b) Manifold rise of applications and paucity of manpower in the office of Drugs Controller General (India) (DCG(I)) have led to slight delay in issuing of import licences.

(c) Yes, Sir.

(d) Because of lack of manpower, the designated system of tracking of application on web site has not been started.

(e) Import applications are being computer registered in the office of DCG(I) for tracking their status.

**Centrally sponsored schemes in NER**

3468. SHRI O.T. LEPCHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the names and the details of various centrally sponsored schemes and programmes launched for promoting health in rural areas of the country particularly in North-Eastern Region and the funds allocated for each of them during the last three years; and

(b) the details of the achievements made thereunder during the last three years?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKALAKSHMI): (a) The flagship programme of Ministry of Health & Family Welfare i.e. National Rural Health Mission (NRHM) was launched by Hon'ble Prime Minister on 12th April 2005. The NRHM provides the overarching umbrella to the existing programmes of Health and Family Welfare including Reproductive Child Health Programme-II, National Vector Borne Disease Control Programme, National Blindness Control Programme, National Iodine deficiency Control Programme, Revised National TB Control Programme, National Leprosy Eradication Programme and Integrated Disease Surveillance Programme.

The details of funds allocated during the last three years for various schemes of the Ministry of Health & Family Welfare is given in Statement-I *{See* below).

(b) Details are given in Statement-II.

***Statement-I***

*Details showing Programme-wise Allocated to North-Eastern States During* 2005-06, 2006-07 & 2007-08

Rs. in Lakhs

| SI. N | | Amount allocated forNE Region BE 2005-06 | Amount allocated forNE Region BE 2006-07 | Amount allocated forNE Region BE 2007-08 |
|---|---|---|---|---|
| 1. | Direction & Admn. | 2297.00 | 1817.00 | 2000.00 |
| 2. | Regional Health Offices | N.A. | N.A. | 20.00 |